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amenorrhoea

No. 12 Dr James

J Ker –

John Ker – Virg^a

Amenorrhoea –

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Thesis

On Amenorrhœa:

By John Ker. Virg^a

Philadelphia. 1821.

Decr. 4th 1821.
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Thos Hopkins -

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From the etymology of the term Amenorrhœa, we might restrict its use to a case, which seldom, if ever, occurs: the strict and literal meaning being a non recurrence of the menstrual flux, at precisely monthly periods, as is evident from a reference to its components, α, μην, and ρεω.

But pathologists have used this term to signify a morbid affection, of which they have made three species viz. Emansio menium, Suppressio menium, and Amenorrhœa difficilis or dysmenorrhœa.

The Emansio menium seems to be generally considered a symptomatic disease, and entertaining such views of its pathology we may readily find prolific causes for its production. Fevers, and indeed all constitutional diseases which cripple and exhaust the vital energies might be enumerated as its causes, together with a number of local affections, and organic defects, such as diseases of the ovaria, the want of a uterus, an imperforate vagina &c.

Some have attributed a long catalogue of morbid symptoms to retention of the menses, though it appears to have been done without any good, or sufficient reason. The argument that is

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most confidently stated to prove, that those symptoms, which have been multiplied to an almost unlimited number, have been occasioned by the retention of the catamenia, is, that they subside or are totally removed by the establishment of that secretion. The reality of the case however, is found on a more accurate investigation of the matter, to be widely disenpant from their views. They seem to have forgotten that it is necessary for the system to be in a certain state of healthfulness, and that all its parts must harmonise, in order for the uterus to carry on its proper healthy secretion, and that retention of this secretion ought to be enumerated amongst the residue of the symptoms of a cachectic state of the whole, or at least of a part of the female oeconomy

It is impossible to say at what time the uterine system should put on this secretory action in any particular subject, since we are taught by physiologists that no two women have the discharge at precisely the same age. It is said of the Hungarian sisters that they frequently differed both in the period and quantity of their menstruation. From these circumstances may we not infer the possibility of their having differed with regard to the flowing of their menstrua in the first instance.

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Being satisfied that Emansio mensium is a symptom and not a disease it would be more appropriately treated of under the diseases of which it is symptomatic; but as it is generally treated of as a disease we shall briefly mention some of the leading indications and modes of effecting them, in two states of the system which most frequently accompany the absence of the catamenia at the age at which they most usually occur.

It is evident from what has been said, that we are not to interfere in every case when the menstrua do not appear at the time, at which we might have expected their appearance. We may justly interpose when together with the absence of this discharge about the thirteenth or fourteenth year we find a sluggishness, and frequent sense of lassitude and debility, with various symptoms of dyspepsia; and sometimes with preternatural appetite. At the same time the face loses its vivid colour, becomes pale, and sometimes of a yellowish hue; the whole body, becomes affected with oedematous swellings. The breathing is hurried by any quick or laborious motion of the body, and the heart is liable to palpitation and syncope. — A head-ach sometimes occurs; but more certainly pains of the back, loins, and

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haunches. This state of things which is sometimes accompanied with a cough resembling phthisis pulmonalis may be distinguished from it by the pulse, although frequent, not being subject to the same regularity in their exacerbations as in hectic; the patient finds no difficulty in lying on either side; the cough is sometimes convulsive, and commonly comes on in paroxysms ~~in the morning~~ attended with exacerbations in the morning, and slight expectoration of phlegm. It has also been usual to note the diagnosis between this state of the system and icterus, from which last it is distinguished by the absence of the peculiar yellow tinge of the adnata, of the colour of the urine, and of the clay coloured stools.

The prognosis in this disease will be favourable or otherwise according to its violence and duration. We may safely affirm that the retention of the menses is in no case the sole cause of death. We must then attempt the cure by bringing the system up to its proper point of activity, and thereby subverting the leading cause of the disorganization, which appears to be in this case atony and loss of the powers of the general system and consequently of the uterine system.

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Emesis naturally suggests itself as one of the best preparatory measures. It will not only be serviceable by evacuating the stomach of any noxious matters which might be lodged there, and clearing it of viscid phlegm and mucus; but beneficial effects may be anticipated from the agitation of the whole system. To produce vomiting the Pulv. Rad. Calli. Ipe. would probably answer as well as any other substance, or its efficacy would probably be increased by the addition of ℈ss or ℈j grs of the Tart. Anti. et Potaspo to xv or xx grs of the former.

The next step is to open the bowels and establish their proper action, which is generally torpid and inefficient. For this purpose we should then recur to the use of cathartics, none of which seem to be more suitable than calomel in combination with some of the drastic vegetable cathartics, such as Jalap, Rhubarb, Aloës, or the Hellebore. Helleborus niger

Full purging will most probably be necessary at first, and then the bowels must be kept in a soluble state by small and repeated doses of of combinations of some of the foregoing medicines, or a combination of Myrrh and aloës, which is esteemed by some practitioners a valuable stimulant ecco-

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portic preparation. After having premised thus much we shall generally find the system pretty well prepared for a course of tonics. Some of the preparations of iron are very highly recommended, as the Rubi. Ferri, Limat. Ferri, and the Tinctu. Muri. Ferri sometimes in conjunction with Myrrh and Bark. Indeed the Peruvian medicine is amongst the first recommended, by some of our ablest and most experienced practitioners for fulfilling the indication we now have in view, that is, to restore the necessary tone and vigour to the general system.

We may variously modify and combine these means pro re nata. The Pulvis Cor. Cincho. Offici. and Limatu. Ferri may be given at the same time, the former in doses of ℥j. or ℥ij. and the latter of ℈ss to ℈j in die, or from x to xx gtts Tinc. Muria. Ferri may be substituted for the Limatu. Ferri.

The cold bath has been recommended, but is thought to be of inferior efficacy to the warm bath rendered stimulating by the addition of salt or capsicum, or some other stimulating article.

Frictions with a flesh brush, or dry finely pulverised salt will be found useful auxiliaries.

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Without a proper dietetic plan conjoined with our medical course we shall not be equally successful. The diet should be generous, nutritive, digestible, and robusant, with an occasional glass of good wine. These measures must be aided by sufficient exercise in the open air, if circumstances do not contra indicate as much exposure. Riding on horse back, walking, jumping the rope, and dancing are the best exercises, if the patients strength will sanction their use, if not, such other modes of exercise must be chosen as can be born without fatigue. The use of the common spinning wheel has been said to be one of the best emmagogues.

In some cases flannel worn next the skin will aid our other endeavours; but the patients feelings will be the best scale by which to regulate the quantity and quality of clothing.

If the measures detailed above should prove abortive, it has been recommended to use certain medicines, which have been supposed to possess emmenagogue virtues, which are however universally acknowledged to be of exceedingly uncertain efficacy.

When the retentio mensium, in florid girls of a full habit, is attended with headach, pains in the back, loins, and about the pelvis, with alternate heats and flushings, we shall then be most

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likely to succeed by abstracting blood, the use of saline purgatives, regular exercise, and restricting our patient to an antiphlogistic regimen.

We come now to the second species of our disease, to which we gave the name suppressio mensium. This term is intended to denote that case of diseased action, in which there is a stop to the healthy secretory process of the uterus after it has been once fairly established. Suppressio mensium is divided either avowedly or virtually by all the writers we have consulted into two forms, or varieties, expressed very appropriately we think by the terms checked and prevented menstruation. The former epithet being applied to the disease which supervenes during the menstrual period, in which the discharge is suddenly stopped, and the latter to that which is produced by causes operating on the system during the interval.

Checked menstruation, which according to some, is the only case of amenorrhoïa which ought to be considered idiopathic, is attended with severe pains about the pelvic viscera; pains in the inferior extremities, back, and loins; headach; hysteric symptoms; severe gastric and intestinal affections, such as nausea, oppression, and spasms; and not unfrequently fever.

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For the production of these symptoms we must suppose the operation of some powerful agents, but as to the nature of this operation we know very little, and shall therefore not indulge in useless speculations on the subject. The causes which we can sometimes fairly charge with the production of these symptoms, are violent passions of the mind, and particularly the agency of cold. The application of cold combined with moisture, to the feet is peculiarly liable to produce the symptoms above enumerated. We may here pertinently remark that this variety of suppression may be symptomatic of some violent disease induced by the causes at the time exerting their influence on the system and ought to be counted as one of the symptoms of that disease rather than ipse morbus.

If this morbid derangement is not speedily subverted it may lay the foundation of more serious inconvenience: we must therefore attempt the cure instanter, by all the most efficient means we can command.

If there is no general disease, we are told that pediluvia, or semicupia assisted by ligatures so applied as to interrupt the return of the blood from the inferior extremities;

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a sudorific anodyne to have its operation promoted by warm diluents; and an aloëtic purgative will succeed to our wishes. But we are apprehensive that a majority of cases will require more active measures; such as vs. pretty active purging, nauseating antimonials &c. It will be necessary in cases of this sort, even after the removal of the present urgency of the symptoms, not to abandon our patient, but to see that the catamenia are secreted at the next period. For this purpose we may direct a prophylactic plan consisting of plain and digestible food; regular exercise; necessary rest taken at the natural season; warm pediluvia a few successive nights previous to the expected period, and if the circumstances of the case call for further interposition we may give an emetic just at the time when the flux should break forth. We must enjoin a careful avoidance during the interval of such exposure ~~as would~~ as would be likely to engender other diseases, which would almost inevitably bring on the other variety of this species, known by the term prevented, or obstructed menstruation.

In obstruction of the menses we have at the time the discharge ought to take place, an absence of it, accompanied

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with pyrexia; severe head-ach; pains in the back, loins, and about the pelvis; pains in the inferior extremities; cold feet; nausea; faintness, costiveness, and hysteric symptoms; sometimes otitis, pains in the mammæ, and pleuritic symptoms.

In conformity with the practice of our highly respected and esteemed teacher of obstetrics we shall mention the diagnosis between this disease, and natural obstructions of the catamenia. All the symptoms attendant on the natural process of gestation are so essentially different from those we have enumerated that it will be quite unnecessary to detail them all in this place. It will be sufficient to state that the symptoms of disease obstructions continue progressively worse and worse, while the distinctive symptoms of pregnancy gradually abate until the fifth month, when the question can be certainly settled by the motions of the fœtus in utero.

When called to a patient affected in the manner above described our object should be to calm the turbulence of the symptoms and establish if possible all the healthy functions. Prompt and energetic measures must then be resorted to.

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In the first instance we should detract blood from the general system in quantities proportioned to the violence of the case, and strength of the subject. XVI ½ will not be too large a bleeding in the generality of cases. Emetics now force themselves on our notice as a sine qua non in our curative scheme. Fifteen or twenty grains of Ipecacuan will probably answer our purpose very well. This should be followed by the exhibition of xv grs of Calomel conjoined with xv vel xx grs Pul. Comp. Jal. A sudorific anodyne may be given at bed-time, and the feet immersed in warm water, which may be repeated every night during the cure.

If the symptoms do not yield now, we may repeat the purging the following day with an infusion of Senna holding in solution Sulphat of Soda, or Sulp. Mag. with a small portion of the tartarized antimony, after which the bowels may be kept open with salts, or probably a combination of Calomel and aloïs might be better.

Cups applied so as to extract blood from the thighs in the vicinity of the pudendum, or leeches to the vulva and anus have been recommended.

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Fomentations to the regio pubis and pudendum will facilitate our other endeavours; also blistering the inner and upper part of the thighs, or the integuments covering the sacrum.

The Unguen. Pul. Mel. Ves. is the article peculiarly adapted to the purpose of exciting vesications in these cases, since it has been satisfactorily proved that the Meloi vesicatorius has a peculiar affinity for the sexual system.

In chronic obstructions the plan of cure must be predicated on the state of the system. In weak relaxed constitutions we must recur to the tonic plan which was detailed in a former part of this essay. Under opposite circumstances the system must be reduced by vs. Cathartics, and an abstemious diet. These are the cases to which medicines which have been called emmenagogue, seem best adapted.

They may be used in conjunction with the tonic plan when that is necessary. Most of these substances are powerful stimulants, and are consequently proper in asthenic diseases independently of their affinity to the sexual organs.

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The powdered leaves of savin in doses v. vel x grs; ℥j Tinctu. Helle. Nig; x gtts Tinctu. Mur. Fer. gradually increased to ℥ij vel ℥iij. ter in die; are said to be amongst the most efficient.

A decoction of Lincga made by adding a pint of boiling water to an ounce of the rattlesnake root bruised, and letting it simmer over the fire till the quantity is reduced one third, to which may be added one aromatic, to prevent nausea, is very highly recommended by persons preeminently qualified to judge of the merits of the article. The state of the system is to be attended to on general principles.

From five to ten grains of aloïs with a grain of calomel every other night at bed-time will be a useful assistant during our emeka course. The preparation of this medicine above directed is to be used to the amount of from three to four ounces daily for a fortnight previous to the expected menstrual period, and pushed as far as the stomach will allow during the period. This will be a good reason to call to our assistance the powers of blisters, and fomentations. The pediluvium and emicupium may also be used now.

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We sometimes have vicarious discharges from the lungs, nose, eyes, gums, fingers, ulcers, and the mammæ; or as they are called by some, devious menses; which have been provided on some occasions to be precisely analagous to that ordinarily evacuated from the healthy uterus: one case of which there is on record, in which there was a regular monthly discharge of a fluid, of the nature of the menses from the nipple, which could not be cured by any other means than the excision of the mamma. These cases are to be cured by establishing the discharge from the natural emunctory.

Amenorrhœa difficilis, or dysmenorrhœa, which is accompanied with pain in the back, and head, and pains about the pelvis much resembling those of labour, though occasioning such severe suffering as to be more intolerable than labour if we can confide in the reports of one of our most eminent accouchieurs, is the last species in our division.

The discharge is very purulent, and for the most part there is a membrane formed similar to the membrana decidua. We have been told that the discharge some times resembles dysenteric stools.

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Dr. J. Burns makes no distinction betwen this disease and what he calls the formation of an organized substance, but this distinction is not recognised by practitioners of this city, and some others of the highest respectability, for they treat of dysmenorrhoïa and the formation of an organized substance as one and the same thing. Some of the most respectable of the profession concur in the opinion that this disease is induced by a disposition in the unimpregnated uterus to form the membrana decidua.

The facts adduced to substantiate this opinion are, that women who discharge this membrane conceive with great difficulty; and if they do conceive it puts an end to the complaint.

Influenced by the idea of an inflammatory diathesis some recommend vs. abstiniousness, aperients, and sudorifics, and warm bathing. This is a case to which the sinega is peculiarly adapted, and we learn from the same high authority that a combination of opium and Camphor is likewise a valuable remedy in this form of the disease, also that blisters are of primary importance.

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We have nearly equal authority for the long continued use of the Tinct. Guaia. Ammoni. and Tinct. Mur. Ves. By an author of no little celebrity in the medical world, we are told that small doses of Calomel every night at bed time, and a dose of the Tinctu. Cincho. Offici. Ammoni. ter in die, is a very efficient practice in dysmenorrhoïa.

Item